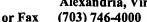
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSU FEE **Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450



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Mathews, Collins, Shepherd & Gould, P.A. 100 Thanet Circle, Suite 306 Princeton, NJ 08540



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Diane Dunn McKay	(Depositor's name)
Class-	(Signature)
7/7/04	(Date)

TOTAL FEE(S) DUE

DATE DUE

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/008,406	11/13/2001	Grigore C. Burdea	1419-151 US	2975	

TITLE OF INVENTION: METHOD AND APPARATUS FOR REHABILITATION OF NEUROMOTOR DISORDERS

**ISSUE FEE** 

nonprovisional	YES	\$665	\$300		\$	965	09/15/2004
EXA	MINER	ART UN	IT	CLASS-SUBCLASS	7		
SOTOMA	YOR, JOHN	3714		434-258000	_		
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				3			

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**PUBLICATION FEE** 

Rutgers, The State University of NJ

ASB III, 3 Rutgers Plaza 3rd Floor

New Brunswick, New Jersey 08901-8559
Please check the appropriate assignee category or categories (will not be printed on the patent); and individual accorporation or other private group entity

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